

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

INTERNATIONAL ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

ADDRESS (number and street)

1448 DUKE STREET

☐Check if different
than previously
reported. (ACC)

ALEXANDRIA

VA

22314

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00144154

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☒January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2007

through

12

31

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Thomas Fischetti

Signature of Treasurer

Electronically Filed by Thomas Fischetti

Date

01

31

2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

INTERNATIONAL ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2007		16636.60
(b) Cash on Hand at Beginning of Reporting Period	16636.60	
(c) Total Receipts (from Line 19)	8085.00	8085.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	24721.60	24721.60
7. Total Disbursements (from Line 31)	1302.97	1302.97
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	23418.63	23418.63
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

INTERNATIONAL ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	7785.00	7785.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	300.00	300.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	8085.00	8085.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➡	8085.00	8085.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	8085.00	8085.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	8085.00	8085.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	1000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	302.97	302.97
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	1302.97	1302.97
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1302.97	1302.97

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	8085.00	8085.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8085.00	8085.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 15

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

INTERNATIONAL ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

A.

Full Name (Last, First, Middle Initial)

Mr. Chip Cleary

Mailing Address 17 Lost Meadow Lane

City

Port Jefferson

State

NY

Zip Code

11777

FEC ID number of contributing
federal political committee.

C

Name of Employer
Palace Entertainment

Occupation

Senior VP, Water Park Division

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 7

Transaction ID: SA11AI.4114

Amount of Each Receipt this Period

800.00

B.

Full Name (Last, First, Middle Initial)

Mr. Peter Herschend

Mailing Address 100 Coporate Place

City

Branson

State

MO

Zip Code

65616

FEC ID number of contributing
federal political committee.

C

Name of Employer
Herschend Family Entertain-
ment

Occupation

Co- Founder

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 5 / 2 0 0 7

Transaction ID: SA11AI.4116

Amount of Each Receipt this Period

800.00

C.

Full Name (Last, First, Middle Initial)

Mr. John Manby

Mailing Address 640 Fall Lake Drive

City

Alpharetta

State

GA

Zip Code

30022

FEC ID number of contributing
federal political committee.

C

Name of Employer
Herschend Family Entertain-
ment

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 5 / 2 0 0 7

Transaction ID: SA11AI.4118

Amount of Each Receipt this Period

800.00

SUBTOTAL of Receipts This Page (optional)

2400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 15

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

INTERNATIONAL ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

A.

Full Name (Last, First, Middle Initial)

Mr. John McReynolds

Mailing Address 10039 Canopy Tree Ct

City

Orlando

State

FL

Zip Code

32836

FEC ID number of contributing
federal political committee.

C

Name of Employer
Universal Studios

Occupation
SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.4104

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Mr. John McReynolds

Mailing Address 10039 Canopy Tree Ct

City

Orlando

State

FL

Zip Code

32836

FEC ID number of contributing
federal political committee.

C

Name of Employer
Universal Studios

Occupation
SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.4170

Amount of Each Receipt this Period

185.00

C.

Full Name (Last, First, Middle Initial)

Mr. John McReynolds

Mailing Address 10039 Canopy Tree Ct

City

Orlando

State

FL

Zip Code

32836

FEC ID number of contributing
federal political committee.

C

Name of Employer
Universal Studios

Occupation
SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1285.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.4122

Amount of Each Receipt this Period

800.00

SUBTOTAL of Receipts This Page (optional)

1285.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 15

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

INTERNATIONAL ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

A.

Full Name (Last, First, Middle Initial)

Mr Jack Morey

Mailing Address 112 Ibis Lane

City

Wildwood Crest

State

NJ

Zip Code

08260

FEC ID number of contributing
federal political committee.

C

Name of Employer
Morey's Piers

Occupation

Executive VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 1 / 2 0 0 7

Transaction ID: SA11AI.4167

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Mr Jack Morey

Mailing Address 112 Ibis Lane

City

Wildwood Crest

State

NJ

Zip Code

08260

FEC ID number of contributing
federal political committee.

C

Name of Employer
Morey's Piers

Occupation

Executive VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.4126

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

Mr. Rob Norris

Mailing Address 55 Manitou Beach Road

City

Hilton

State

NY

Zip Code

14468

FEC ID number of contributing
federal political committee.

C

Name of Employer
Seabreeze Park

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 5 / 2 0 0 7

Transaction ID: SA11AI.4102

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 15

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

INTERNATIONAL ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

A.

Full Name (Last, First, Middle Initial)

Mr. Rob Norris

Mailing Address 55 Manitou Beach Road

City State Zip Code
Hilton NY 14468

FEC ID number of contributing
federal political committee.

C

Name of Employer
Seabreeze Park

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.4123

Amount of Each Receipt this Period

400.00

B.

Full Name (Last, First, Middle Initial)

Mr. Jim Pattison

Mailing Address 7576 Kinspointe Parkway
#188

City State Zip Code
Orlando FL 32819

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ripley Entertainment, Inc

Occupation
Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 7

Transaction ID: SA11AI.4112

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Mr. Andy Quinn

Mailing Address 116 Rock Haven Lane

City State Zip Code
Pittsburgh PA 15228

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kennywood

Occupation
Director of Community Outreach

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.4108

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 15

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

INTERNATIONAL ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

A.

Full Name (Last, First, Middle Initial)

Mr. Robert Rippy

Mailing Address 136 Edgewater Lane

City

Wilmington

State

NC

Zip Code

28403

FEC ID number of contributing
federal political committee.

C

Name of Employer
Jungle Rapids

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.4106

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mr. Clark Robinson

Mailing Address 3046 S 975 E

City

Bountiful

State

UT

Zip Code

84010

FEC ID number of contributing
federal political committee.

C

Name of Employer
IAAPA

Occupation

Vice President of Global Outreach

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 7

Transaction ID: SA11AI.4110

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

7785.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 / 15

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

INTERNATIONAL ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

A.

Full Name (Last, First, Middle Initial)

John Porter

Mailing Address 7840 Red Leaf Drive

City
Las Vegas

State
NV

Zip Code
89131

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: NV

District: 03

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.4157

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

1000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 / 15

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

INTERNATIONAL ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

A.

Full Name (Last, First, Middle Initial)

Bank Of America NA

Mailing Address P.O. Box 25118

City
Tampa

State
FL

Zip Code
33622-5118

Purpose of Disbursement

Bank Card Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.4130

Date of Disbursement

/ /

Amount of Each Disbursement this Period

34.95

B.

Full Name (Last, First, Middle Initial)

Bank Of America NA

Mailing Address P.O. Box 25118

City
Tampa

State
FL

Zip Code
33622-5118

Purpose of Disbursement

Bank Card Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.4136

Date of Disbursement

/ /

Amount of Each Disbursement this Period

34.95

C.

Full Name (Last, First, Middle Initial)

Bank Of America NA

Mailing Address P.O. Box 25118

City
Tampa

State
FL

Zip Code
33622-5118

Purpose of Disbursement

Bank Card Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.4137

Date of Disbursement

/ /

Amount of Each Disbursement this Period

41.41

SUBTOTAL of Disbursements This Page (optional)

111.31

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 / 15

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

INTERNATIONAL ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

A. Full Name (Last, First, Middle Initial) Bank Of America NA	Transaction ID: SB29.4138 Date of Disbursement																				
Mailing Address P.O. Box 25118	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	1		2	0	0	7												
City Tampa State FL Zip Code 33622-5118	Amount of Each Disbursement this Period																				
Purpose of Disbursement Bank Card Fee Candidate Name	<table border="1"> <tr> <td colspan="10">72.16</td> </tr> </table>	72.16																			
72.16																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Bank Of America NA	Transaction ID: SB29.4139 Date of Disbursement																				
Mailing Address P.O. Box 25118	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	3		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	3		2	0	0	7												
City Tampa State FL Zip Code 33622-5118	Amount of Each Disbursement this Period																				
Purpose of Disbursement Bank Card Fee Candidate Name	<table border="1"> <tr> <td colspan="10">5.95</td> </tr> </table>	5.95																			
5.95																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Bank Of America NA	Transaction ID: SB29.4140 Date of Disbursement																				
Mailing Address P.O. Box 25118	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	1		2	0	0	7												
City Tampa State FL Zip Code 33622-5118	Amount of Each Disbursement this Period																				
Purpose of Disbursement Bank Card Fee Candidate Name	<table border="1"> <tr> <td colspan="10">41.30</td> </tr> </table>	41.30																			
41.30																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

119.41

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 / 15

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

INTERNATIONAL ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

A.

Full Name (Last, First, Middle Initial)

Bank Of America NA

Mailing Address P.O. Box 25118

City
Tampa

State
FL

Zip Code
33622-5118

Purpose of Disbursement

Bank Card Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.4141

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5.95

B.

Full Name (Last, First, Middle Initial)

Bank Of America NA

Mailing Address P.O. Box 25118

City
Tampa

State
FL

Zip Code
33622-5118

Purpose of Disbursement

Bank Card Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.4142

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4.50

C.

Full Name (Last, First, Middle Initial)

Bank Of America NA

Mailing Address P.O. Box 25118

City
Tampa

State
FL

Zip Code
33622-5118

Purpose of Disbursement

Bank Card Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.4143

Date of Disbursement

/ /

Amount of Each Disbursement this Period

51.35

SUBTOTAL of Disbursements This Page (optional)

61.80

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 / 15

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

INTERNATIONAL ASSOCIATION OF AMUSEMENT PARKS AND ATTRACTIONS PAC (IAAPA-PAC)

A.

Full Name (Last, First, Middle Initial)

Bank Of America NA

Mailing Address P.O. Box 25118

City
Tampa

State
FL

Zip Code
33622-5118

Purpose of Disbursement

Bank Card Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.4144

Date of Disbursement

/ /

Amount of Each Disbursement this Period

10.45

SUBTOTAL of Disbursements This Page (optional)

10.45

TOTAL This Period (last page this line number only)

302.97